Combined Declaration	n For Pacent.	Application	and I	Power of Attorney			836160	MW	JOREI
As below named inve	entor, I hereby decl	lare that:							
My residence, post office address	ss and citizenship a	re as stated belov							
I believe I am the original, first	and sole inventor (if only one name	is listed	below) or an original, first	and joint in	ventor (i	f plural name	es are list	ed below)
of the subject matter which is cl	aimed and for which	ch a patent is sou	ght on th	e invention entitled:					
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METHOD AND SY					IGERY	PKU	DUCIS	FKU	VI A
ONE TIME SCAN	OF MOTION	N PICTUR	E FII	∠M.					
NT 8 T									
The specification of which (che	ck only one item be	elow):							
is attached hereto.									
X was filed as United Sta	ites Application S	erial No. 10/045	i,867 or	29 October 2001 and					
was amended on (if ap	oplicable).								
was filed as PCT intern	national applicatio	n Number on a	and was	amended on (if applica	able).				
I hereby state that I have review	ed and understand	the contents of the	ne above	-identified specification, i	ncluding the	claims, a	as amended l	y any ar	nendment
referred to above.									
I acknowledge the duty to discl	ose to the U.S. Pat	ent & Trademark	Office	all information known to 1	me to be mat	terial topa	itentability a	s defined	in Title
37, Code of Federal Regulation									
I hereby claim foreign priority	benefits under Title	e 35, United Stat	es Code	, §119 (a)-*d) or 365 (b) o	of any foreig	n applic	ation(s) for p	atent or	inventors
certificate, or (365 (a) of any PC	CT international ap	plication(s) whic	h design	ates at least one country of	ther than the	United	States of An	nerica, lis	ted below
and have also identified below									
one country other than the Unit	ed States of Americ	ca filed by me on	the sam	ie subject matter naving a	ning date o	eiore ma	it of the appr	icauon(s) of which
priority is claimed: PRIOR FOREIGN/PCT APP	LICATION(S) AN	D ANY PRIORI	TY CL/	IMS UNDER 35 U.S.C.	119:	*			
COUNTRY		PPLICATION NUMBER		DATE OF FILING			PRIORITY CLAIMED U	NDER 35 USC	119
(# PCT, indicate PCT)		TELEVISION		(minth/dayyear)	YES N				
							YES		NO
•							YES		NO
			e			/ \ 1 .			
I hereby claim the benefit under	r Title 35, United S	states Code, 119 (}(e) of a	ny United States provisior	ial applicatio	n(s) liste	d below:		
PRIOR PROVISIONAL APP	LICATION(S) AN	D ANY PRIORI	TY CL	AIMS UNDER 35 U.S.C.	§119 (e):		·		
PROVISIONAL	APPLICATION NUMBER				FILING DATE (mo	nth/day/year)			
		-			*****				
								-	
I hereby claim the benefit under the United States of America th	r Title 35, United S	states Code, §120	of any p	orior United States applications matter of each of the	tion(s) or PC	Tinterna annlica	itional applic	ation(s) sclosed i	designatin n that/tho
prior applications(s) in the man	ner provided by the	ne first paragraph	of Title	35, §112, I acknowledge	the duty to	disclose	to the U.S. I	Patent &	Trademar
Office all information known t	to me to be materi	al topatentability	y as defi	ned in Title 37, Code of	Federal Reg	ulations	§1.56, which	h became	e available
between the filing date of the pr	nor application(s) a	and the national o	r PC1 ii	iternational filing date of t	nis applicatio	on:			
PRIOR US APPLICATIONS	OR PCT INTERN	NATIONAL APP	LICAT	ONS DESIGNATING T	HE U.S FOR	R BENE	FIT UNDER	t	
35USC§120:	LLE ADD				<u> </u>	eT.	ATUS (Check o	no)	
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Combined	Declaration	For P	atent Apr.	ation and Power	of Attorney	(Continued)

ATTORNEY DOCKET 83616DMW

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

•	end Corres	Patent Legal S	Direct Telephone Calls to: (name and telephone number)		
		Eastman Kod 343 State Stre Rochester, N	David M. Woods (716) 477-5256 FAX: (716) 477-4646		
	FULL NAME OF INVENTOR	FAMILY NAME Rosen	FIRST GIVEN NAME Daniel	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY 2829 East Wasatch Court Thousand Oaks	STATE OR FOREIGN COUNTRY California 91362	COUNTRY OF CITIZENSHIP USA	
	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
,	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	BUSINESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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Ì	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
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ľ	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
2/5/02	DATE	DATE
SIGNATURE OF INVENTOR 204 DATE	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
	DATE	DATE

FEB :	2 2 2)		
I hereby certify that this control ponder United States Postal Services as first of Commissioner of Patents and Tradem	class m	all in an enve	elope address	the sed to	Date:	2/13/	102			
Robin J. R. Name: Robin G. Reeves	reve	2								
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Name of conveying party(ie Assignor # 1: Daniel		n								
2. Name and address of receiv			C'.							
Name: Eastman Kodak Cor	npan	, 	City:	Koc.	hester		State:	NY	Zip:	14650-2201
3. Nature of Conveyance:	X	Assignm	ent		Other:					
Assignment Execution Date Assignor # 1: 05 Febr	nuary									
4. Application number(s) or pa If this document is being filed to date of the Assignment, unless stated a	gether	with a new a			ation No. To ution date of the			ne as the ex	cecution	
5. Name and address of party t	o who	om correst	ondence c	oncer	ning docume	ent should	he mail	ed:		-
Name: Thomas H. Cle		•	Addı						t Legal Sta	aff
City: Rochester				dress: Eastman Kodak Company, Patent Legal Staff State: NY Zip: 14650-2201				***		
6. The total number of applicat	ions	and notante				4-4- d C		1403		
7. Total fee (37 CFR 1.21h):	9			losed				charged	to deposit	account
8. Eastman Kodak Company D			<u> </u>			Authorize		Chargea	to deposit	account
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9. Statement and signature. To the best of my knowledg of the original document.	re and	! belief, the	e foregoing	; infor	mation is tru	ie and cori	rect and	any atta	iched copy	v is a true copy
Robin G. Reeve	es		1 >	Ra	Juni S	. Ro	eves	. 1	21	13/12
Name of Person Sign					Signat	ture		_		Date
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						Total	number o	f pages in	cluding cove	er sheet: 2

ASSIGNMENT

For good and valuable consideration received, including salary or payment for the making of inventions, or employee benefits, I/we do hereby assign to Eastman Kodak Company, a New Jersey corporation having a principal place of business in Rochester, New York, its successors and assigns, the entire right, title and interest, including priority rights, in and to all of my/our inventions and improvements disclosed in an application for patent for

METHOD AND SYSTEM FOR PRODUCING MULTIPLE IMAGERY PRODUCTS FROM A ONE TIME SCAN OF MOTION PICTURE FILM

which is [check one]	
a non-provisional application for patent executed on the a provisional application for patent by: an international application for patent by:	date(s) shown below by:
Assignor # 1: Daniel Rosen	Date 2/5/02
in the United States Patent and Trademark Office, together provisional or non-provisional application, and any divisional thereof, and any applications, including international application part in the United States and all other countries. I/We do he assignment to Eastman Kodak Company with respect to the entitle inventions were made. I/We also do hereby assign to Eastman Letters Patent and similar protective rights granted on any of the priority rights arising from any of these applications under regulations. I/We agree that any of these applications, at Eastman the name of Eastman Kodak Company or its designee. I/We Eastman Kodak Company may be necessary to obtain any such thereto in Eastman Kodak Company or its designee. I/We furth to myself/ourselves, I/we shall furnish to Eastman Kodak memoranda, or other evidence in my/our possession relating the any exparted or interpartes legal or administrative proceeding Letters Patent and similar protective rights that may be granted manner as such issuance shall be requested by Eastman Kodak construed and interpreted in all respects in accordance with the	I, continuation, substitute, reissue, re-examination application in the corresponding or being a counterpart thereto in whole or in the counterpart thereto in whole or in the counterpart the counterpart thereto in whole or in the counterpart the time and to the counterpart the time and to the counterpart the counterpart thereto in and to the counterpart thereto in the time and to company's sole that the right to claim any applicable the terms of any applicable conventions, treaties, statutes or man Kodak Company's sole discretion, may be filed and issued to agree to execute such documents which in the judgment of high patents and similar protective rights and to maintain the title are agree that, upon request, but without out-of-pocket expense to company or its designee any data, information, exhibits, or any of said inventions or improvements and shall testify in the counterpart thereto. I/We authorize and request issuance of all the counterpart thereto. I/We authorize and request issuance of all the counterpart that and in such a company or its designee. This document shall be governed laws of the State of New York, USA.
Signature of Assignor# 1	Witness Address, if other than Eastman Kodak Company, Rochester, NY 14650
Daniel Rosen Date: 2/5/02 Witnessed:	